

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/601655	FILING DATE			
						APPLICANT(S)				
						CLAIMS				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
1	1	1		1			51			
2	1			1			52			
3	1			1			53			
4	1			1			54			
5	1			1			55			
6	1			1			56			
7	1			1			57			
8	1			1			58			
9	1			1			59			
10	1			1			60			
11	1			1			61			
12	1			1			62			
13	1			1			63			
14	1			1			64			
15	1			1			65			
16	1			1			66			
17	1			1			67			
18	1			1			68			
19	1			1			69			
20	1			1			70			
21	1			1			71			
22				1			72			
23				1			73			
24				1			74			
25				1			75			
26				1			76			
27				1			77			
28			3		3		78			
29							79			
30							80			
31							81			
32							82			
33							83			
34							84			
35							85			
36							86			
37							87			
38							88			
39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	1	1	3	1	3		TOTAL IND.			
TOTAL DEP.	35	22	17	17			TOTAL DEP.			
TOTAL CLAIMS	36	25	20	20			TOTAL CLAIMS	36	25	20

1
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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. 09/601,655	FILING DATE	
						APPLICANT(S)		
2-27-03 2-24-04						CLAIMS		
AMENDMENT			AMENDMENT					
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1						51	
2							52	
3		1					53	
4							54	
5							55	
6							56	
7							57	
8							58	
9							59	
10							60	
11							61	
12							62	
13							63	
14		3					64	
15							65	
16							66	
17							67	
18							68	
19		1					69	
20	1						70	
21							71	
22		1					72	
23		1					73	
24		1					74	
25		1					75	
26		1					76	
27							77	
28		3					78	
29		3					79	
30		3					80	
31		3					81	
32		3					82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	3						TOTAL IND.	
TOTAL DEP.	29						TOTAL DEP.	
TOTAL CLAIMS	32						TOTAL CLAIMS	